

**REQUEST FOR AND AUTHORIZATION OF DISCHARGE OF ACCOUNTABILITY**  
(Rev. & Tax. Code, §2923)

**TAX COLLECTOR'S OFFICE**

\_\_\_\_\_ COUNTY, STATE OF CALIFORNIA

The following have failed to pay unsecured property taxes in the sum of \$\_\_\_\_\_, duly assessed for the year \_\_\_\_\_, - \_\_\_\_\_. I believe that further collection effort would be impracticable.

I hereby request a discharge of accountability in accordance with provisions of California Revenue and Taxation Code section 2923.

Such discharge would not release the person(s) named herein from the payments of any amounts that are due and owing.

Date \_\_\_\_\_  
\_\_\_\_\_ Tax Collector

\_\_\_\_\_ Approved \_\_\_\_\_ Not Approved

Attest: \_\_\_\_\_ Board of Supervisors

\_\_\_\_\_  
Clerk of the Board of Supervisors \_\_\_\_\_ County

By \_\_\_\_\_  
Deputy

Seal